

Application Data Sheet**Application Information**

Application Number:: 10/532618
Filing Date:: April 25, 2005
Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?::
Number of CDs::
Number of Copies of CDs::
Sequence Submission?::
Computer Readable Form (CRF)?::
Number of Copies of CRF::
Title:: COSMETIC AND PHARMACEUTICAL FOAM
Attorney Docket Number:: 113873.124 US2
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure:: 1
Total Drawing Sheets:: 2
Small Entity?:: Yes
Latin Name::
Variety Denomination Name::
Petition Included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?:: No



Applicant Information

Applicant Authority Type:: Inventor
 Primary Citizenship Country:: Israel
 Status:: Full Capacity
 Given Name:: 1-00 Dov
 Middle Name::
 Family Name:: Tamarkin
 Name Suffix::
 City of Residence:: Maccabim
 State or Province of Residence:: ILX
 Country of Residence:: Israel
 Street of Mailing Address:: 537 Har Hila Street
 City of Mailing Address:: Maccabim
 State or Province of Mailing Address::
 Country of Mailing Address:: Israel
 Postal or Zip Code of Mailing Address:: 71908

Applicant Authority Type:: Inventor
 Primary Citizenship Country:: Israel
 Status:: Full Capacity
 Given Name:: 2-00 Doron
 Middle Name::
 Family Name:: Friedman
 Name Suffix::
 City of Residence:: Karmeil Yosef
 State or Province of Residence::
 Country of Residence:: Israel ILX
 Street of Mailing Address:: 33 Alon Street
 City of Mailing Address:: Karmeil Yosef 7

State or Province of Mailing Address::

Country of Mailing Address:: Israel

Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Israel

Status:: *300* Full Capacity

Given Name:: Meir

Middle Name::

Family Name:: Eini

Name Suffix::

City of Residence:: Ness Ziona

State or Province of Residence::

Country of Residence:: Israel

Street of Mailing Address:: 2 Hashaked Street

City of Mailing Address:: Ness Ziona

State or Province of Mailing Address::

Country of Mailing Address:: Israel

Postal or Zip Code of Mailing Address::

Correspondence Information

Correspondence Customer Number:: 23483

Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::

Phone Number::

Fax Number::

E-Mail Address::

Representative Information

Representative Customer Number::	23483	
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	is a national phase under 35 USC 371	PCT/IB2003/005527	10/24/2003
PCT/IB2003/005527	An application claiming the benefit under 35 USC 119(e)	<u>60/429546</u>	11/29/2002

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
PCT	IB2003/005527	10/24/2003	Yes
Israel	152486	10/25/2002	Yes

Assignee Information

Assignee Name:: Foamix Ltd.

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::